| PATENT APPLICATION FEE DETERMINATION RECORD Application or Doc | | | | | | | | | | | or Dockel N | umber | |
|--|--|--|--|----------------------------------|--------------|---------------------------------------|---------------------|-----------------|------------------------|------------|--------------|------------------------|--|
| Effective December 8, 2004 CLAIMS AS FILED - PART I | | | | | | | | | 01561147 | | | | |
| | | | SMALL EN | ΓΙΤΥ | | OTHER | THAN | | | | | | |
| | | | (Column 1) | | | (Column 2) | | TYPE | | OR | SMALL | | |
| U.S. NATIONAL STAGE FEES | | | | | | · · · · · · · · · · · · · · · · · · · |] | RATE | FEE | 1 | RATE | FEE | |
| BASIC FEE | | | SMALL ENT | ī. ≃ \$ 150 | LAR | GE ENT. = \$ 300 | | BASIC FEE | 150 | OR | BASIÇ FEE | | |
| EXAMINATION FEE | | | Satisfies PCT 4 (4) = \$50 | 7 \$ 100 | | ther situations = \$ 100 / \$ 200 | | EXAM. FEE | 251 | | EXAM. FEE | | |
| SEARCH FEE | | | U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400 | | | other situations = \$ 250 / \$ 500 | | SEARCH FEE | 100 | | SEARCH FEE | | |
| FEE FOR EXTRA SPEC. PGS. | | | minus 100 = | | | / 50 = | | X \$ 125 = | | ٠- | 'X \$ 250 = | | |
| TOTAL CHARGEABLE CLAIMS | | | 50 minus 20 = . | | | 34 | | X \$ 25 = | 750 | OR | X \$ 50 = | | |
| INDEPENDENT CLAIMS | | | | ninus 3 = | • | 4 | | X \$ 100 = | 427 | OR | X \$ 200 = | | |
| | | DENT CLAIM PR | ESENT | | | | | + \$ 180 = | | OR | + \$ 360 = | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | TOTAL | | OR | TOTAL | | |
| | | | | | | | | | | | | | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | | SMALL E | NTITY | OR | OTHER | | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUMI PREVIO | BER SUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | • | Minus | •• | | = | | X \$ 25 = | | OR | X \$ 50 = | 102 | |
| | Independent | • | Minus | ••• | - | = | | X \$ 100 = | | OR | X \$ 200 = | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | ı | + \$ 180 = | | OR | + \$ 360 = | | |
| | | | | TOTAL ADDIT. | | ÖR | TOTAL ADDIT. FFF | | | | | | |
| - | - | (Column 1) | | (Colun | າກ 2) | (Column 3) | | - | | | ····· | e | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUME PREVIO PAID I | BER | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | | Minus | ** | | = | ſ | X \$ 25 = | | OR | X \$ 50 = | | |
| | Independent | • | Minus | *** | | = | | X \$ 100 = | | OR | X \$ 200 = | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | + \$ 180 = | | OR | + \$ 360 = | | | |
| | | | | | | | | TOTAL ADDIT. | | OR | TOTAL ADDIT. | | |
| FFF L | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| • | If the entry in colu If the "Hinhest No | mn 1 is less than the mber Previously Pai | e entry in column : | 2, write "0" in | column | 13. | | | | | | l | |
| | If the "Highest Nu | mber Previously Pai | d For th THIS SE | PACE is less | than T | enter "3" | | | | | | 1 | |
| | the trightest duti | nber Previously Paid | FOR (TOTAL OF INC | i epend ent) is | the high | hest number found i | in the | appropriate box | in column 1, | | | l | |

FORM 9TO-875 (Rev. 02/2005)

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